

**Student Information Form (Returning Students Only)**

**St. Pius X Faith Formation**

**Students Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred Phone number**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred e-mail**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Faith Formation Grade Entering \_\_\_\_**

**Pre-K \_\_\_ Sun 9:15 – 10:15**

**Gr. 1-5 Class Choice \_\_\_ Sun 9:15am – 10:15am \_\_\_Tue 4:15pm – 5:15pm**

**Middle School Grade \_\_\_\_\_\_ Class Time Monday 6:00pm – 7:15pm**

**Emergency Contact(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Allergies/Health/Behavioral Concerns:**

**Other Information I need to share about my child:**

***Parent/Guardian Commitment:***

***By registering my child for the St Pius X Church Faith Formation Program, I am agreeing to attend Parent Meetings; Student-Family Activities and Events as scheduled throughout the year. I understand that part of my child’s Faith Formation is attending Mass regularly with my child.***

***Initials \_\_\_\_\_***

**Payments: (Please initial which payment method you are choosing)**

**Check or Money order (payable to Saint Pius X) Initial \_\_\_**

**Online** [**www.saintpius.org**](http://www.saintpius.org) **– Online Giving Initial \_\_\_**

**In person at the Faith Formation Office (by appointment or during class time) Initial \_\_\_**

***Parent/Guardian Print Name****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

***Parent/Guardian Signature****\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_